

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 200311332-2

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SEMICONDUCTOR DEVICE	

SEMICONDUCTOR DEVICE				
the specification of which is attached hereto unless the following box is checked:				
() was filed on Number	as US Application No. or I and was amended on	PCT International Application(if applicable).		
including the claims, as ame	eviewed and understood the contents nded by any amendment(s) referred t is material to patentability as defined	o above I acknowledge the duty to		
	1			

Foreign Application(s) and/or Claim of Foreign Priority

I hereby claim foreign priority benefits under Title 35, United States Code Section 119 of any foreign application(s) for patent or inventor(s) certificate listed below and have also identified below any foreign application for patent or inventor(s) certificate having a filing date before that of the application on which priority is claimed:

COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119
			YES: NO:
			YES: NO:

Provisional Application

I hereby claim the benefit under Title 35, United States Code Section 119(e) of any United States provisional application(s) listed below:

APPLICATION NUMBER	FILING DATE
60/490,239	07/25/2003

U. S. Priority Claim

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

APPLICATION NUMBER	FILING DATE	STATUS (patented/pending/abandoned)

POWER OF ATTORNEY:

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

> Place Customer **Customer Number** 022879 Number Bar Code Label here

Send Correspondence to: **HEWLETT-PACKARD COMPANY** Intellectual Property Administration P.O. Box 272400 Fort Collins, Colorado 80527-2400

Direct Telephone Calls To:

Gregg W. Wisdom (360) 212-8052

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Inventor: _	Randy Hoffman	Citizenship: US
Residence:	219 SW 7th Street, Corvallis, Oregon	97333
Post Office Address:	Same as residence	
& Afre		122104
Inventor's signature		

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 200311332-2

	Full Name of joint inventor:	Hai Chiang	Citizenship: US	
	Residence:	925 SW 15th Street #202, Corvallis, Oregon 97333		
	Post Office Address:			
	Tost office Address:			
	Inventor's Signature	01/22/2004 Date		
	v			
	Full Name of joint inventor:	John Wager	Citizenship: US	
	Residence:	2021 NW Woodland Drive, Corv		
	Post Office Address:	Same as residence		
	The state of the s	Wh	21 JAN. 2054	
	Inventor's Signature	1109	Date Date	
	Full Name of joint inventor:		Citizenship:	
2	Residence:			
O	Post Office Address:			
O				
	Inventor's Signature		Date	
00				
	Full Name of joint inventor:		Citizenship:	
	Residence:			
2	Full Name of joint inventor: Residence: Post Office Address:			
-				
S	Inventor's Signature		Date	
60				
	Full Name of joint inventor:		Citizenship:	
	Residence:			
	Post Office Address:			
	Inventor's Signature		Date	
	Full Name of joint inventor:		Citizenship:	
	Residence:			
	Post Office Address:			
	Inventor's Signature		Date	
	Full Name of joint inventor:		Citizenship:	
	Residence:			
	Post Office Address:			
	Inventor's Signature		Date	